

**DECLARATION FOR UTILITY OR
DESIGN PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration
Submitted
With Initial
Filing
UNSIGNED

OR

☐ Declaration
Submitted after
Initial Filing
(surcharge 37 CFR
1.16 (e) required)

Attorney Docket Number 50005-37

First Named Inventor BOND, Leonard J.

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first, and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SYSTEM AND TECHNIQUE FOR DETECTING THE PRESENCE OF FOREIGN MATERIAL

(Title of the Invention)

the specification of which

☒ X

is attached hereto

OR

was filed on (MM/DD/YYYY)

as United States

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claim, as amended by any amendment specifically referred to above.

I acknowledge and hereby disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119 (a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Check Only If Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)

Filing Date (MM/DD/YYYY)

☐

Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

Type a plus sign (+) inside this box →



WENMM SB/01 pg 2

DECLARATION – Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below, and insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Number**Parent Filing Date (MM/DD/YYYY)****Parent Patent Number (if applicable)**☐

Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

☐

Customer Number

OR

☒

Registered practioner(s) name/registration number listed below.

Place Customer
Number Bar Code
Label Here

Name	Registration Number	Name	Registration Number
John M. Bradshaw	46,573	Stephen R. May	29,255

☒

Additional registered practioner(s) named on supplemental Registered Practioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number Bar Code Label OR ☒ Correspondence address below

Name	John M. Bradshaw						
Address	WOODARD EMHARDT NAUGHTON MORIARTY & McNETT						
Address	111 Monument Circle, Suite 3700						
City	Indianapolis	State	IN	ZIP	46204		
Country	US	Telephone	317/ 634-3456		Fax	317/637-7525	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:☐

A petition has been filed for this unsigned inventor.

Given Name (first and middle [if any])				Family Name or Surname			
Leonard J.				B ond			
Inventor's Signature						Date	
Residence: City		State	Wa	Country	U.S.A.	Citizenship	U.S.
Post Office Address							
Post Office Address							
City		State	WA	ZIP		Country	U.S.A.

☒Additional inventors are being name on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

ADDITIONAL INENTOR(S)

Name of Joint Inventor, if any:				A petition has been filed for this unsigned inventor.	
Given Name (first and middle [if any])				Family Name or Surname	
Aaron A.				Diaz	
Inventor's Signature					Date
Residence: City		State	WA	Country	U.S.A.
Post Office Address					
Post Office Address					
City		State	WA	ZIP	Country
					U.S.A.
Name of Joint Inventor, if any:				A petition has been filed for this unsigned inventor.	
Given Name (first and middle [if any])				Family Name or Surname	
Richard A.				Pappas	
Inventor's Signature					Date
Residence: City		State	WA	Country	U.S.A.
Post Office Address					
Post Office Address					
City		State	WA	ZIP	Country
					U.S.A.
Name of Joint Inventor, if any:				A petition has been filed for this unsigned inventor.	
Given Name (first and middle [if any])				Family Name or Surname	
Timothy				Stewart	
Inventor's Signature					Date
Residence: City		State	WA	Country	U.S.A.
Post Office Address					
Post Office Address					
City		State	WA	ZIP	Country
					U.S.A.



DECLARATION	Registered Practitioner Information (Supplemental Sheet)
-------------	---

Name	Registration Number	Name	Registration Number
Harold R. Woodard	16,214		
C. David Emhardt	18,483		
Joseph A. Naughton, Jr.	19,814		
John V. Moriarty	26,207		
John C. McNett	25,533		
Thomas Q. Henry	28,309		
Charles R. Reeves	28,750		
Vincent O. Wagner	29,596		
Steve Zlatos	30,123		
Spiro Bereveskos	30,821		
Clifford W. Browning	32,201		
R. Randall Frisk	32,221		
Daniel J. Lueders	32,581		
Kenneth A. Gandy	33,386		
Timothy N. Thomas	35,714		
Kurt N. Jones	37,996		
John H. Allie	39,088		
Holiday W. Banta	40,311		
Troy J. Cole	35,102		
L. Scott Paynter	39,797		
Charles J. Meyer	41,996		
Matthew R. Schantz	40,800		
Gregory B. Coy	40,967		
Lisa A. Hiday	40,036		
John V. Daniluck	40,581		
Christopher A. Brown	41,642		
C. John Brannon	44,557		
Arthur J. Usher IV	41,359		
Douglas A. Collier	43,556		
Brad A. Schepers	45,431		
Scott J. Stevens	29,446		
James B. Myers	42,021		
Charles P. Schmal	45,082		
Edward E. Sowers	36,015		